### Riverview Psychiatric Center Executive Leadership Committee

**Date: June 6, 2007** 

### COMMITTEE MEMBERS PRESENT

X	David Proffitt, Superintendent	X	Lucia Nadeau, Personnel Officer
X	William Nelson, Medical Director	X	Angie Newhouse, Staff Development Director
X	Jamie Morrill, Deputy Supt. Of Administrative Services	X	Holly Dixon, Peer Support Coordinator
X	Teresa Mayo, Deputy Supt. Of Programs	X	Barbara Sylvester-Pellett, Director Risk Mgmt./Safety
	Stephanie George-Roy, Social Work Director	X	Bob Patnaude, Safety Officer
X	Terry O'Neal, Admission Coordinator	X	Tina Libby, Rehabilitation Services Director
X	Colleen Cutler, Program Service Director	X	Lisa Manwaring, Program Service Director
X	Barbara Mispilkin, Program Service Director	X	Bob Lamoreau, Program Service Director

Minute Recorder: Charlotte Lalime Next Meeting: June 20, 2007 Minutes Approved:

Topic	Discussion	Action Plan	Person Responsible
Review of Minutes	Minutes of June 16, 3007 reviewed by Committee	Approved as written.	C. Lalime
	members		
Superintendent Report	D. Proffitt reports that it looks as though LD 1033, an act	Informational	
	regarding the mandatory administration of medication in		
	hospitals serving psychiatric patients, may pass. The		
	responsibility will be on us to engage clients in treatment.		
	D. Proffitt discusses overdue appraisals and states they need to be completed by June 15 <sup>th</sup> . This could be a type I deficiency for us he adds. All supervisors need to assure completion.	Complete all overdue performance evaluations.	All supervisors
	D. Proffitt commends B. Mispilkin and C. Cutler for timely submission of their monthly reports. He asks that he	Submit monthly reports by the end of today.	Department heads

receive the others by the end of today. D. Proffitt also reminds supervisors to be sure and includes verification of staff supervision on their monthly reports.	Action Plan	Person Responsible
After following-up on the extended seclusion/restraint episodes, D. Proffitt states that his perception is that there is some element of reality embedded in the grievances he receives. Some of our staff interact with clients in an unkind, rigid way. This could possibly be a contributing factor in our number of our seclusion/restraint events. None of us should accept staff acting in less than a therapeutic style and if this is seen, we need to help them develop a more therapeutic manner of interaction. The leadership team needs to be sensitive to this issue and when it occurs, speak to the supervisor.	Noted	
J. Morrill reports that the budget remains balanced. PS will have an anticipated surplus of \$550,000. All Other will net out to \$0, there will be a small carry forward-surplus in Capital	Informational	
Dr. Mayo reports that the seclusion/restraint debriefing process is underway. Another recommendation of the PA trip group was to have professional staff provide 1-1 coverage, but Dr. Mayo adds that additional fact-finding is needed before a decision is made.	Informational  Further review/discussion of 1-1 coverage by professional staff.	Dr. Mayo
Expectations for professional staff also being discussed along with Treatment Mall reorganization.	Noted	
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	and combine it with recognition of those staff and clients that have gone smoke free. Possibly another barbeque in the courtyard. Discussion of planning this event for June 20 <sup>th</sup> with T. Libby and Dr. Mayo as co-chairs.		
	D. Proffitt urges all to carefully review the names they submit as possible candidates for Quality Champions. D. Proffitt also recommends recognizing any staff who has taken the initiative to improve their health and wellness in any way.	Informational	
Risk Management/Safety	B. Sylvester-Pellett reports that the Committee has not met since our last Executive Leadership Meeting. She adds that these Committees have been combined.	Noted	
Policy Review	No policies for review at this time.		
Infection Control	B. Sylvester-Pellett states that this Committee has met and continues their work on the Infection Control Manual.	Informational	
	B. Sylvester-Pellett reports that Kathleen Mitton has reported the staff health data and the results are not acceptable. Dr. Nelson adds that compliance would probably improve if we provided inoculations here.	Informational	
Behavior Response Committee	A. Newhouse reports that the committee reviewed the charter and changes were recommended. The meeting day has been changed to Wednesday in order to improve attendance.	Informational	
	D. Proffitt reminds all that he had asked that supervisors need to contact him when a member is unable to attend, not	Informational	

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Quality Council	The Council met last week and is scheduled to meet again on June 22 <sup>nd</sup> .	Noted	
Policy and Procedure Committee	This Committee is scheduled to meet this Thursday and anticipates having policies from section's, ED, and PC.	Informational	
Pharmacy and Therapeutics Committee	Dr. Nelson reports that their will be Meditech demos on June 13 <sup>th</sup> and 14 <sup>th</sup> , and he will be attending the Pharmacy Module. D. Proffitt adds that this module offers a little more reporting capacity than he had originally thought.	Informational	
Staff Development	A. Newhouse reports that the Psych Team has been offering Therapeutic Language Training. Also, A. Newhouse would like to train some trainers soon. D. Proffitt adds that he is in hopes of getting to the point where self-education modules can be offered.	Informational	
	A. Newhouse also reports that there are 2 more days to complete NAPPI. The Annual Training went very well, with 99% of our staff training now complete.	Informational	
Human Rights Committee	Have not met since the last Executive Leadership Meeting.		
Quality Improvement Teams	No new teams initiated since our last ELC Meeting.	Noted	
Staff Injury Reports	DLP of security – B. Patnaude has met with him. He reports that DLP responded to stat call and the escort of a client to SRC and during this event sustained a soft tissue injury. Staff identified that clearer direction from the leader would have helped along with his own awareness of his	A. Newhouse will provide a review on the NAPPI close contact.	A. Newhouse

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	<ul> <li>M.A.injured in stat call when there was an altercation with client and RN.</li> <li>C.M. trying to help nurse, wrapped client to keep client from hitting. Staff states he neglected to perform the approved NAPPI wrap.</li> <li>M.K. – L. Crommett has not met with this staff as yet. She will report at our next meeting.</li> <li>D.B. and J.W. will be reviewed at our next meeting.</li> </ul>	Review of approved NAPPI wrap.  Report in 2 weeks.  Report in 2 weeks.	L. Crommett L. Crommett
Labor Management	<ul> <li>L. Nadeau reports there has been a <i>tentative</i> 2007-2009</li> <li>MSEA agreement. Tentative agreements are: <ol> <li>\$700 lump sum payment in July 2007</li> <li>2% raise effective 7/1/08</li> <li>Add a step, drop a step Jan 2009</li> <li>New longevity step increase Sept 1, 2007</li> <li>Mileage reimbursement increases</li> <li>Institution stipend of 30 cents per hour for everyone who works in an institution effective 7/1/08</li> </ol> </li> <li>Reimbursement for advanced classes, one class per semester based upon availability of funds now includes tuition, related fees and books.</li> </ul>	Informational	

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Nursing Leadership	L. Crommett states there has been no meeting since the last ELC. There are staffing issues and an emergency staffing meeting is scheduled for today. Will be looking at some creative staffing plans.	Informational	
	L. Crommett reports that in an effort to recruit nurses, a television ad will be run on Time Warner. L. Crommett mentions that she would like to offer sign-on bonuses as an incentive.	Informational	
	LPNs will be slowly moving out of the med rooms to provide direct care. This is a part of the effort to move towards a primary nursing plan.	Informational	
Meeting adjourned at 11:	10		